

## APPLICATION FOR BASIC LAW ENFORCEMENT SCHOOL

## TENNESSEE LAW ENFORCEMENT TRAINING ACADEMY 3025 LEBANON PIKE NASHVILLE, TN 37214-2217



Name <sub>.</sub>			S	ocial Security	No.				
•	(First)	(Middle)	(Last)	,	(full nun	nber required)			
Mailing	Address								
				_		(Zip Code	•		
Home	l elephone	(include area code)	Age	L	Date of Birth	mm/dd/vyvy)			
		Weight		ace		(			
i ioigiit						`	_		
Notify i	n Emergency	Nama	Da	lationship	Phone				
		Name	Re	iationship					
Do you	smoke?	Yes	No						
BASIC	POLICE SCH	looL							
	Date of school	ol							
	If above scho	ol is filled, give alterna	tive school and da	te					
EMPLO	DYMENT HIS	TORY							
	Name of prese	ent employer							
	Are you preser law enforceme	ntly employed as a full-tent officer?	ime commissioned	Yes		No			
	Date of full-tin	ne commission by pres	sent employer						
	Title/Rank of y	our present position							
	Have you had	prior law enforcement e	experience?	Yes		No			
	f you have prior law enforcement experience (before the above date) give name of law enforcement agency and date(s).								
	Have you bee	o a contified afficer in Th	l or another state?	Voc		No			
	•	n a certified officer in TN		Yes		No	_		
		e date and state							
	What was you	r occupation prior to er	ccupation prior to entering law enforcement?						
	What is your re	eason for entering the la	aw onforcement profe	ecion?					
	vviiat is your fe	eason for entening the R	aw emorcement profe	301011!					

EDUCATIONAL BAG	CKGROUND					
Are you a high	n school graduate?	Yes	No			
, ,	hest grade completed					
	nave a GED Certificate?	Yes	No			
	d place GED Certificate was	s issued				
List schools a	e dates and degrees:					
Llave yeu bee		any aviminal violation?	no No			
(If yes, attach	en arrested or charged with a explanation)	any criminal violation?	es No			
Are you physi	cally able to perform vigoro	us physical activities? Y	es No			
•	9	application is correct a by the rules and regulatior	nd complete to the best of my ns of the Academy.			
Date		Signature of Applicant				
I certify that officer employed by School.	the above information is my department and here	eby approve the applicant	DYMENT AGENCY HEAD  Int is a full-time law enforcement to attend Basic Law Enforcement and on this document commits the			
	ursuant to T.C.A. §39-16-7		ne on the decement committee the			
		Signature				
		Title				
		Department				
		Mailing Address				
		City/State	7:- Cada			
		Phone #	Zip Code Fax #			